

Division of Corporations

Page 1 of 2

**A150000263**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H15000263135 3)))



H150002631353ABC

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : JAM MARK LIMITED  
Account Number : I200000000112  
Phone : (305) 789-7758  
Fax Number : (305) 789-7799

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

FILED  
15 NOV -5 AM 10:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA/FOREIGN LP/LLLP  
DPM INVESTMENTS, LP**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$1,052.50

RECEIVED

15 NOV -5 AM 9:06

144831-1

NOV 06 2015

**S. YOUNG**

Electronic Filing Menu

Corporate Filing Menu

Help

11/5/2015 10:06 AM FROM: Fax Server

TO: +18506176383

P. 3

850-617-6381

11/4/2015 4:03:33 PM PAGE 1/001 Fax Server



November 4, 2015.

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

JAM MARK LIMITED

SUBJECT: DPM INVESTMENTS, LP  
REF: W15000072588

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

The document number of the name conflict is L13000024960.

Any partner or agent of a partnership that is a legal or other commercial entity, and not an individual, must be organized or otherwise registered and maintain an active status with the Florida Department of State. It cannot be dissolved, revoked, canceled or withdrawn.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris  
Regulatory Specialist II

FAX Aud. #: B15000263135  
Letter Number: 215A00023308

*Please see attached. Please use original fax date 11/3/15. Thanks!*

P.O. BOX 6327 - Tallahassee, Florida 32314

FILED  
15 NOV -5  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

15 NOV -5

**Diazdon, Esmi (MIA - X22275)**

---

**From:** Fax Center <RightFaxAdmin@hklaw.com>  
**Posted At:** Tuesday, November 03, 2015 3:58 PM  
**Conversation:** Your fax has been successfully sent to FL - DPM Investmentss, LP at 18506176383.  
Please click here <http://hkfax> to review.  
**Posted To:** DPM - David P. Martin  
**Subject:** Your fax has been successfully sent to FL - DPM Investmentss, LP at 18506176383.  
Please click here <http://hkfax> to review.

Your fax has been successfully sent to FL - DPM Investmentss, LP at 18506176383. Please click here <http://hkfax> to review.

---

From: Esmi Diazdon  
Account: 144831  
Matter: 00001

---

11/3/2015 3:50:17 PM Transmission Record  
Sent to 918506176383 with remote ID ""  
Result: (2/37;0/0) Unknown Error (35)  
Page record: NONE SENT  
Elapsed time: 00:04 on channel 4

11/3/2015 3:55:25 PM Transmission Record  
Sent to 918506176383 with remote ID "850-617-6381"  
Result: (0/339;0/0) Successful Send  
Page record: 1 - 4  
Elapsed time: 01:36 on channel 2

FILED  
NOV -5 AM 10:42  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

original fax date 11/3/15. Thx!

H15000263135 3

**CERTIFICATE OF LIMITED PARTNERSHIP  
OF  
DPM INVESTORS, LP**

The undersigned, being the general partner desiring to form a limited partnership pursuant to the Florida Limited Partnership Act (the "Act"), has executed this Certificate of Limited Partnership pursuant to the foregoing Act and states herein as follows:

**I. Name**

The name of the limited partnership is DPM INVESTORS, LP (the "Partnership").

**II. Principal and Mailing Address**

The principal and mailing address of the Partnership is:

c/o 701 Brickell Avenue, Suite 3300  
Miami, Florida 33131

**III. Registered Agent and Registered Office**

The address of the registered office of the Partnership is 1201 Hays Street, Tallahassee, Florida 32301 and the name of the registered agent to accept service of process within this State is Corporation Service Company.

**IV. General Partner**

The name and business address of the general partner of the Partnership is:

DPM GP, LLC, a Delaware limited liability company  
c/o 701 Brickell Avenue, Suite 3300  
Miami, Florida 33131

The undersigned General Partner of the Partnership hereby submits this document and affirms that the facts stated herein are true and further confirms that any false information submitted in a document to the Department of State constitute a third degree felony as provided for in section 817.155 of the Florida Statutes.

DPM GP, LLC, a Delaware limited liability company,  
General Partner

By:

David P. Martin, Manager

H15000263135 3

FILED  
15 NOV -5 4:10:42  
TALLAHASSEE  
FLORIDA  
STATE  
SECRETARY

**ACCEPTANCE REGISTERED AGENT**

The undersigned agrees to act as registered agent for DPM INVESTORS, LP to accept service of process at the place designated in the certificate of limited partnership, and to comply with the provisions of Chapter 620, Florida Statutes and acknowledges that the undersigned is familiar with and accepts, the obligations of such position on this 3rd day of November, 2015.

Corporation Service Company

By: April Miller

Name: April Miller

Title: Assistant Secretary

FILED  
15 NOV -5 AM 10:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA